



Bib Data Sheet


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SERIAL NUMBER 09/526,100	FILING DATE 03/15/2000 RULE -	CLASS 709	GROUP ART UNIT 2756	ATTORNEY DOCKET NO. 6019.3026
APPLICANTS Steven Sheppard, Sebastopol, CA ; A. J. McInnis, Santa Rosa, CA ;				
** CONTINUING DATA ***** <i>Continuation in Part</i> THIS APPLICATION IS A CONTINUATION OF 09/026,036 02/19/1998 ABN WHICH CLAIMS BENEFIT OF 60/038,276 02/19/1997				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 05/25/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY CA	SHEETS DRAWING 10	TOTAL CLAIMS 45
INDEPENDENT CLAIMS 8				
ADDRESS John P Blasko Prof. Corp. 107 North Broad Street Doylestown, PA 18901				
TITLE Optical conversion device				
FILING FEE RECEIVED 1530	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			
<input type="checkbox"/> All Fees				<input type="checkbox"/> 1.16 Fees (Filing)
<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)				<input type="checkbox"/> 1.18 Fees (Issue)
<input type="checkbox"/> Other _____				<input type="checkbox"/> Credit



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CONFIRMATION NO. 9168

SERIAL NUMBER 09/526,100	FILING OR 371(c) DATE 03/15/2000 RULE	CLASS 725	GROUP ART UNIT 2611	ATTORNEY DOCKET NO. 6019.3026
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APPLICANTS

Steven Sheppard, Sebastopol, CA;
A. J. McInnis, Santa Rosa, CA;

** CONTINUING DATA *****

This application is a CON of 09/026,036 02/19/1998 PAT 6,317,884
which claims benefit of 60/038,276 02/19/1997

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

05/25/2000

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 10	TOTAL CLAIMS 45	INDEPENDENT CLAIMS 8
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

ADDRESS

27833

TITLE

Optical conversion device

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		<input type="checkbox"/> 1.18 Fees (Issue)
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